



APPLICATION FOR BUILDING PERMIT

Date of Application: _____

Permit No. _____

Property Location: _____

PIDN: _____

Name of Owner: _____

Phone # _____

Street Address _____ **City/Town** _____ **State** _____ **Zip Code** _____

List other application form(s) submitted for this project with approval dates:

Form _____
Form _____
Form _____
Form _____

Date Approved _____
Date Approved _____
Date Approved _____
Date Approved _____

Cost of Construction \$ _____

Payment amount, required at time of Application (Form 2) Submittal: \$ _____

Refer to Fee Schedule in Chapter 128, Town of Bridgeville Code. Payment amount is from total in following table.

Permit Fee Item	Required Fee	Amount of Payment
Building Permit Cost (% of Est. Cost.)		
Connection Fee		
Sewer Inspection		
Sewer Impact Fee		
Water Impact Fee		
Meter Pit		
Water Tapping		
Water Meter		
Library Fund		
Fire/EM Fund		
EM #2		
C/O		
Zoning		
Delinquent Charges (Clean Hands Policy)		
TOTAL		

Date Form 2 Received by Town: _____

Received by: _____

Construction Information

New ____ Addition ____ Repairs ____ Renovation ____ Deck ____ Patio ____ Deiveway ____ Demo ____
Other _____

Applicants Information

Print Applicant's Name: _____ Phone # _____

Street Address _____ City/Town _____ State _____ Zip Code _____

General Contractor: _____ Phone # _____

Street Address _____ City/Town _____ State _____ Zip Code _____

Plans/Drawings provided: Yes ____ No ____ Survey/Site Plan Provided: Yes ____ No ____

Total Sq. Feet: _____

Project Description _____

Applicants Certification

I hereby certify that I am the owner of record of the named property, or that I have been authorized by the owner of record to make this application as authorized agent and that I assume the responsibility for the establishment of official property lines and required setbacks prior to start of construction, and agree to conform to all applicable codes and laws of this jurisdiction. I further certify that this information is true and correct to the best of my knowledge.

Applicants Signature: _____ Date: _____

For Office Use Only

Permit Fee \$ _____ EM Fee \$ _____ Zoning Fee \$ _____ C/O Fee \$ _____ Total Permit Fee \$ _____
Approved by: _____ Date Permit Issued: _____ Permit # _____
Town Official Signature _____